

Revision: HCFA-PM-91-4
August 1991

(BPD)

OMB No.: 0938-

State: Mississippi

SECTION 2 - COVERAGE AND ELIGIBILITY

Citation
42 CFR
435.10 and
Subpart J

2.1 Application, Determination of Eligibility and Furnishing Medicaid

- (a) The Medicaid agency meets all requirements of 42 CFR Part 435, Subpart J for processing applications, determining eligibility, and furnishing Medicaid.

TN No. 92-02
Supersedes TN No. 75-7

Effective Date January 1, 1992
Approval Date March 16, 1992
Date Received January 30, 1992

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Revision: HCFA-PM-93-2 (MB)
March 1993

State: Mississippi

Citation

42 CFR
435.914
1902(a)(34)
Act

- 2.1 (b) (1) Except as provided in items 2.1(b)(2) and (3) below, individuals are entitled to Medicaid services under the plan during the of the three months preceding the month of application, if they were, or on application would have been, eligible. The effective date of prospective and retroactive eligibility is specified in ATTACHMENT 2.6-A.

1902(e)(8) and
the
Act

- (2) For individuals who are eligible for 1905(a) of Medicare cost-sharing expenses as qualified Medicare beneficiaries under section 1902(a)(10)(E)(i) of the Act, coverage is available for services furnished after the end of the month in which the individual is first determined to be a qualified Medicare beneficiary. ATTACHMENT 2.6-A specifies the requirements for determination of eligibility for this group.

1902(a)(47) and
1920 of the Act

- (3) Pregnant women are entitled to ambulatory prenatal care under the plan during a presumptive eligibility period in accordance with section 1920 of the Act. ATTACHMENT 2.6-A specifies the requirements for determination of eligibility for this group.

42 CFR
434.20

- (c) The Medicaid agency elects to enter into a risk contract with an HMO that is--

X Qualified under title XIII of the Public Health Service Act or is provisionally qualified as an HMO pursuant to section 1903(m)(3) of the Social Security Act.

X Not Federally qualified, but meets the requirements of 42 CFR 434.20(c) and is defined in ATTACHMENT 2.1-A.

 Not applicable.

TN No. 95-14
Supersedes
TN No. 93-05

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October 1991

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State/Territory: Mississippi

Citation

1902(a)(55) of the Act 2.1(d) The Medicaid agency has procedures to take applications, assist applicants, and perform initial processing of applications from those low income pregnant women, infants, and children under age 19, described in §1902(a)(10)(A)(i)(IV), (a)(10)(A)(i)(VI), (a)(10)(A)(i)(VII), and (a)(10)(A)(ii)(IX) at locations other than those used by the title IV-A program including FQHCs and disproportionate share hospitals. Such application forms do not include the ADFC form except as permitted by HCFA instructions.

* Previously approved as page 11b.

TN No. <u>93-20</u>	Approval Date <u>1-31-94</u>	Effective Date <u>10-1-93</u>
Supersedes		
TN No. <u>New</u>	Date Received <u>12-8-93</u>	HCFA ID: 7985E
<u>84-14</u>		